PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10606061

				_44	760 9		0					
		CLAIMS AS	Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS			32				R	ATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			32 minus 20=		. 19		×	\$ 9=		OR	X\$18=	216
INDEPENDENT CLAIMS			minus 3 =		* 2		X	42=		OR	X84=	168
MULTIPLE DEPENDENT CLAIM P			RESENT				+1	40=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in colu						column 2	TC	TAL		OR	TOTAL	1134
CLAIMS AS AMENDED - PART II 5-17-07 (Column 1) (Column 2) (Column 3)						SN	İÄLL	ENTITY	OR	OTHER SMALL	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDĮ- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 30	Minus		2	= 0	X	9=		OR	X\$18=	0
	Independent	NTATION OF M	Minus		CI AIM	- 0	×	12=		OR	X84=	0
	THOTTHESE		JETH LE DEF		OLANI	 	+1	40=		OR	+280=	0
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	Ø
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18≟	
	Independent	* NTATION OF M	Minus	***	CLAIM	=	·×	12=		OR	X84=	
_	rino i Pricoc	INTATION OF IM	JETIPLE DEF	ENDENT	CDAIIVI	للن	+1	40=		OR	+280=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	<u>·</u>
·		(Column 1)		(Colur		(Column 3)	1001				ADDIT: I CE	
AMENDWENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	R/	TE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	XS	9=	•	OR	X\$18=	
	Independent	*	Minus	***	CLAINA	=	X	2=		OR	X84=	
<u></u>	rino i rnese	NTATION OF M	OLITE DE	ENDEN	CLAIM		+1	40=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										OR	TOTAL	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEEADDIT. FEEA												
		_										